

Quality Review Team Charter
September 2019

Committee / Workgroup Name	Quality Review Team
Statement of Purpose	<p>The Quality Review Team (QRT), a joint Department of Behavioral Health and Developmental Services (DBHDS) and Department of Medical Assistance Services (DMAS) committee, is responsible for oversight and improvement of the quality of services delivered under the Commonwealth's Developmental Disabilities (DD) waivers as described in the approved waivers' performance measures.</p>
Authorization / Scope of Authority	<p>The QRT is responsible for reviewing performance data collected regarding the Centers for Medicare and Medicaid Services' (CMS) Home and Community-Based Services (HCBS) waiver assurances:</p> <ul style="list-style-type: none"> • Waiver Administration and Operation: Administrative Authority of the Single State Medicaid Agency • Evaluation/Reevaluation of Level of Care • Participant Services - Qualified Providers • Participant-Centered Planning and Service Delivery: Service Plan • Participant Safeguards: Health and Welfare • Financial Accountability <p>The work of the QRT is accomplished by accessing data across a broad range of monitoring activities, including those performed via DBHDS licensing and human rights investigations and inspections; DMAS quality management reviews (QMR) and contractor evaluations; serious incident reporting; mortality reviews; and level of care evaluations.</p> <p>Each DD waiver performance measure is examined against the CMS standard of 86% or above compliance. Those measures that fall below this standard are discussed to identify the need for provider specific as well as systemic remediation. The committee may make recommendations for remediation such as:</p> <ul style="list-style-type: none"> • retraining of providers • Information Technology system enhancements for the collection of data • change in licensing status • targeted QMR • referral to the Provider Remediation Committee for mandatory provider remediation • payment retraction or ceasing referrals to providers • review of regulations to identify needed changes • review of policy manuals for changes • targeted or system-wide training <p>The team identifies barriers to attainment and the steps needed to address them. The QRT re-examines data in the</p>

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	following quarter to determine if remediation was successful or if additional action is required. If remediation and/or improvement is not recommended for a performance measure that falls below 86%, the justification for that decision will be documented in the meeting minutes.
Charter Review	<p>The QRT was established in August 2007 in response to CMS's new expectations that states implement a quality review process for HCBS waivers.</p> <p>This charter shall be reviewed by DBHDS and DMAS on an annual basis or as needed and submitted to the Quality Improvement Committee for review.</p>
Model for Quality Improvement	<p>The activities of the QRT are a means for DMAS and DBHDS to implement CMS's expected continuous quality improvement cycle, which includes:</p> <ul style="list-style-type: none"> • Design • Discovery • Remediation • Improvement
Structure of Workgroup / Committee:	
Membership	<p>DBHDS: Director of Waiver Operations or designee Senior DD Policy Analyst Director of Provider Development or designee Director of Office of Licensing or designee Director of Office of Human Rights or designee Director of Office of Community Quality Improvement or designee Director, Mortality Review Committee or designee Settlement Agreement Director</p> <p>DMAS: Director of Division of Developmental Disabilities or designee Developmental Disabilities Program Manager or designee QMR Program Administration Supervisor or designee</p>
Quorum	A quorum shall be defined as 50% plus one of voting membership.
Meeting Frequency	The committee will, at a minimum, meet four times a year.

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Leadership and Responsibilities	<p>The DBHDS Senior DD Policy Analyst shall serve as chair and will be responsible for ensuring the committee performs its functions including development of meeting agendas and convening regular meetings. The standard operating procedures include:</p> <ul style="list-style-type: none">- Development and annual review and update of the committee charter- Regular meetings to ensure continuity of purpose- Maintenance and distribution of quarterly updates and/or meeting minutes as necessary and pertinent to the committee's function- Maintenance of QRT data provenance- CMS Evidentiary and state stakeholder reporting- Quality improvement initiatives consistent with CMS's Design, Discover, Remediate, Improve model. <p>Meeting minutes are prepared and distributed to committee members prior to the meeting. Minutes shall reflect the committee's review and analysis of data and any follow up activity.</p> <p>The QRT shall produce an annual report to the DBHDS Quality Improvement Committee on the findings from the data review with recommendations for system improvement. The QRT's report will include an analysis of findings and recommendations based on review of the information regarding each performance measure.</p>
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